Approved for use through 7731/2006. OMB 6081-0032
U. S. Patent and Trademark Office; U. S. DePARTMENT OF COMMERCE

Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT FEE DETERMINATION RECORD

16536-6693 (66536-6693) Substitute for Form PTO-875 OTHER THAN APPLICATION AS FILED OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) NUMBER EXTRA RATE (\$) FEE (\$) RATE (\$) FEE (\$) NUMBER FILED BASIC FEE (37 CFR 1.16(a), (b), or (c)) M/A N/A Ν/Δ MIZA (37 CFR 1.16(k), (i), or (m)) **EXAMINATION FEE** M/A Ν/Δ Ν/Δ NIZA (37 CFR 1.16(o), (p), or (q)) minus 20 : 20 37 : 0.00 OR 0.00

TOTAL CLAIMS (37 CFR 1.16(i)) INDEPENDENT CLAIMS 0.00 12 minus 3 = 9: 0.00 (37 CFR 1.16(h)) If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). N/A MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(i)) N/Δ

TOTAL

AMENDMENTS AS FILED

" If the difference in column 1 is less then zero, enter "0" in column 2

		(Column 1)		(Colu	mn 2)	(Coli	umn 3)		SMALL I	ENTITY	OR	SMALL	ENTITY
NT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY		SENT		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
ME	Total (37 CFR 1.16(i))	· 76	Minus		57	= _	19	x	25.00 =	475.00	OR	×	2
AMENDMENT	Independent (37 CFR 1.16(h))	12	Minus		12	=	0	×	-		OR	×	
₹I	Application Size Fee	(37 CFR 1.16(s))											
1	FIRST PRESENTATIO	N OF MULTIPLE DI	EPEND	NT CLAI	M (37 C	FR 1.1	6(j))		N/A		OR	N/A	
									TAL D'L FEE	475.00		TOTAL ADD'L FEE	
		(Column 1)		(Colur	mn 2)	(Coli	umn 3)						
		CLAIMS									1		

		(Coli	umn 1)		(Coli	ımn 2)	(00	Humn 3)			
AMENDMENT B		REM AF	AIMS AINING TER IDMENT	NUI PREV	HEST MBER IOUSLY O FOR	PRESENT EXTRA					
DME	Total (37 CFR 1.16(i))		9	Minus	**	76	=	0			
E I	Independent (37 CFR 1.16(h))	•	3	Minus	***	12	=	0			
l₹	Application Size Fee (37 CFR 1.16(s))										
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))										
$\overline{}$											

RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
х =	0.00	OR	x =	
x =	0.00	OR	x =	
N/A		OR	N/A	
TOTAL	0.00	OR	TOTAL ADD'L FEE	

0.00

TOTAL

OTHER THAN

0.00

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.18. The Information is required to obtain or retain a benefit by the public which is to file (and by the USFTO to process) an application. Confidentiality is governed by 38 U.S. C.12 and 37 CFR 1.4. This collection is estimated to state in estimating a training sometimes and submitting the completed application form to the USFTO. Time will vary depending upon the fundividual case. Any comments on the amount of time your require to complete his form andor suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Pathan and Trademark Office U.S. Department of Commerce, P.O. Box 1450, Alexandris, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND (T) Commissioner for Patharts, P.O. Box 1450, Alexandris, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND (T) Commissioner for Patharts, P.O. Box 1450, Alexandris, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND (T) Commissioner for Patharts, P.O. Box 1450, Alexandris, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND (T) Commissioner for Patharts, P.O. Box 1450, Alexandris, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND (T) Commissioner for Patharts, P.O. Box 1450, Alexandris, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND (T) Commissioner for Patharts, P.O. Box 1450, Alexandris, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND (T) Commissioner for Patharts, P.O. Box 1450, Alexandris, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND (T) Commissioner for Patharts, P.O. Box 1450, Alexandris, VA 22313-1450, Alexandris, VA 2313-1450, A

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.